Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
, ,		
Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	Check
	Chapter 13	amend

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yoursel	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Angelis	
	First name	First name
Write the name that is on your government-issued		
picture identification (for	Middle name	Middle name
example, your driver's	Anderson	
license or passport	Last name	Last name
Bring your picture identification to your	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
meeting with the trustee.	Gamx (Gr., Gr., II, III)	Gainx (Gr., Gr., II, III)
2. All other names you	Angelis	
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Jones	
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4	XXX - XX- 8193	xxx - xx-
digits of your Social Security	OR	OR
number or federal Individual Taxpayer	-	
Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

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De	ebtor 1 Angelis		Anderson	Case number (if	known)	
	First Name	Middle Name	Last Name			
		About Debtor 1:		About De	btor 2 (Spouse Onl	y in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ess names or EINs.	I have i	not used any business nan	nes or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business	name	
	last 8 years	Business name		Business	name	
	Include trade names and doing business as names	EIN		EIN		
		EIN		EIN		
5.	Where you live			If Debtor 2	lives at a different add	ress:
		6333 S Sangamon St Apt: 206		_		
		Number Street		Number	Street	
		Chicago Illinois	60621			_
		City State	Zip Code	City	State	Zip Code
		0-1				·
		Cook County		County		
		If your mailing address is dif	forent from the one shove		iiiicic	f:II is
		fill it in here. Note that the cour this mailing address.			s mailing address is different that the court will send a	
		Number Street		Number	Street	
				_		
		City State	Zip Code	City	State	Zip Code
6.	Why you are choosing this	Check one:		Check one:		
	district to file for bankruptcy	Over the last 180 days before lived in this district longer	fore filing this petition, I have than in any other district.		ne last 180 days before filir n this district longer than in	
	. ,	I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)	I have a	another reason. Explain. (\$	See 28 U.S.C. §§ 1408.)
				-		
				-		
				-		

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Deb				Case number (if know	n)
Part	First Name 2: Tell the Court Abo	Middle Name La out Your Bankruptcy Case	st Name		
7. T E Y	The chapter of the Bankruptcy Code You are choosing to ile under				(b) for Individuals Filing for Bankruptcy (Form
	low you will pay he fee	court for more details about may pay with cash, cashier on your behalf, your attorne I need to pay the fee in instancial Individuals to Pay Your Filing I request that my fee be we By law, a judge may, but is less than 150% of the official	how you may pay. To be how you may pay with a cree stallments. If you chay fee in Installments (aived (You may required to, waive all poverty line that apout choose this option	ypically, if you rder If your a dit card or checoose this option Official Form 10 est this option of your fee, and oplies to your fan, you must fill of the results.	only if you are filing for Chapter 7. may do so only if your income is mily size and you are unable to pay out the <i>Application to Have the</i>
b	dave you filed for pankruptcy within he last 8 years?	✓ No. Yes. District District District	When When When	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
t s f y	are any bankruptcy cases pending or peing filed by a spouse who is not iling this case with rou, or by a pusiness partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor District	<u>W</u> hen	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
	Oo you rent your esidence?	✓ No. Go to line 12. Yes. Has your landlord obtained a ✓ No. Go to line 12. Yes. Fill out <i>Initial State</i> this bankruptcy pe	ment About an Eviction Jud		nt to stay in your residence? (Form 101A) and file it with

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Debtor 1 Angelis First Name		Midd		Anderson Last Name	Case number (if know	vn)	
Part 3: Report About An	v Bus						
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No.	Go to Part 4. Name and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements and location of both statements and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements a	Street Street Street Street Street Street Street Street	11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B)) § 101(53A))	Zip Code	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	dead opera	llines. If y ations, ca C. § 11 1 No.	ou indicate that you are a ash-flow statement, and a 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code.	a small business deb federal income tax re napter 11. ter 11, but I am NOT	ether you are a small busine tor, you must attach your mo eturn or if any of these docur a small business debtor acc	ost recent balance sheements do not exist, follo not exist, follo cording to the definition	t, statement of w the procedure in 11
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs I	Immediate Attent	ion
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs			What is the hazard? If immediate attention is r Where is the property?	needed, why is it nee	ded? Street		
immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zi	p Code

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Debtor 1 Angelis Anderson Case number (if known)

Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 Angelis			nber (if known)			
First Name Part 6: Answer These Qu	Middle Name uestions for Reporting Purpo	Last Name				
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Vo. Yes.					
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 r	lion \$1,000,000,001-\$10 billion Illion \$10,000,000,001-\$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 r	lion \$1,000,000,001-\$10 billion lillion \$10,000,000,001-\$50 billion			
Part 7: Sign Below						
For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chall If no attorney represents me ame fill out this document, I hall request relief in accordance I understand making a false sconnection with a bankruptcy years, or both. 18 U.S.C. §§ 1 /s/ Angelis Anderson Signature of Debtor 1 Executed on	Chapter 7, I am aware that I r I States Code. I understand the pter 7. and I did not pay or agree to paye obtained and read the noti with the chapter of title 11, Ur statement, concealing property case can result in fines up to 152, 1341, 1519, and 3571.	nay proceed, if eligible, under Chapter 7, experience reach chapter, and I way someone who is not an attorney to help be required by 11 U.S.C. § 342(b). White States Code, specified in this petition. To represent the control of th			

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Debtor 1 Angelis		Anderson	Case number ((if known)		
First Name	Middle Name	Last Name				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not	eligibility to proceed un the relief available und to the debtor(s) the not	der Chapter 7, 11, 12 er each chapter for vicce required by 11 U.	2, or 13 of title 11, U which the person is e S.C. § 342(b) and, ir	hat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the		
need to file this page.	/s/ Elizabeth Placek Signature of Attorney		Date	10/7/2016 MM / DD / YYYY		
	Elizabeth Placek Printed name					
	Semrad Law Firm Firm name					
	20 S. Clark Street Street					
	28th Floor Chicago		Illinois	60603		
	City		State	Zip Code		
	Contact phone	3124477838	Email address	eplacek@semradlaw.com		
			Illino	pis		
	Bar number State					

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Fill in this information to identify your case:						
Debtor 1	Angelis	Anderson				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois			
(State)						
Case number (If known)						

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$9,975.00
1c. Copy line 63, Total of all property on Schedule A/B	\$9,975.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$14,020.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$10,179.00
Your total liabilities	\$24,199.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,393.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,378.00

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De	btor 1	Angelis		Anderson	Case n	umber (if known)				
		First Name	Middle Name	Last Name						
Par	t 4:	Answer These Question	ns for Administrat	ive and Statistical Re	ecords					
6.	Are yo	u filing for bankruptcy unde	er Chapters 7, 11, or 13	?						
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	✓ Ye	es.								
7. \	What I	kind of debt do you have?								
	_	our debts are primarily consumily, or household purpose. 11				•				
		our debts are not primarily is form to the court with your c		ave nothing to report on this	part of the form	. Check this box and subm	iit			
8.		the Statement of Your Cu. 122A-1 Line 11; OR, Form 12	•	1,,,	nthly income from	m Official	\$594.00			
9.	Cop	by the following special cate	egories of claims from	Part 4, line 6 of Schedule	E/F:					
	Froi	m Part 4 on Schedule E/F, c	opy the following:			Total claim				
	9a. l	Domestic support obligations	(Copy line 6a.)			\$0.00				
	9b. ⁻	Taxes and certain other debts y	ou owe the government.	(Copy line 6b.)		\$0.00				
	9c. (Claims for death or personal in	jury while you were intox	cicated. (Copy line 6c.)		\$0.00				
	9d. \$	Student loans. (Copy line 6f.)				\$1,510.00				
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)										
	9f. C	Debts to pension or profit-shar	ing plans, and other simi	lar debts. (Copy line 6h.)		\$0.00				
	9g. '	Total. Add lines 9a through 9f				\$1,510.00				

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FIII III II IIIS	IIIOIIIIalioii lo i	dentity your cas	∪ .					
Debtor 1	Angelis		NA: alalla N		Anderson			
Debtor 2	First Na	ame	Middle I	vame	Last Name			
	if filing) First Na	ame	Middle I	Name	Last Name			
United Sta	ates Bankruptcy	/ Court for the:	Northern		District of Illinois			
Case num (If known)	nber				(State)			
Officia	al Form	106A/B				_1		Check if this is an amended filing
Sche	dule A/E	3: Prope	erty					12/1
category v responsib write your	where you thin le for supplying name and cas	k it fits best. B ng correct info se number (if ki	e as complete an rmation. If more s nown). Answer ev	d accu space i very qu	set only once. If an asset fits in moi irate as possible. If two married ped is needed, attach a separate sheet estion. , or Other Real Estate You C	ople are f to this fo	iling together, both are or rm. On the top of any a	equally
1. Do you			uitable interest ir	n any r	esidence, building, land, or similar	property	?	
\checkmark	No. Go to Par							
1.1	Yes. Where is Street address		other description		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ly.	Do not deduct secured of the amount of any secure Creditors Who Have Clater Current value of the entire property?	aims or exemptions. Put de claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Number	Street	Zin Code		and nvestment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
	City	State	Zip Code	Who one.	Pebtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Ut least one of the debtors and another	heck	Check if this is con (see instructions)	mmunity property
				Othe	r information you wish to add abou	ut this ite	m, such as local	
.,				prop	erty identification number:			
1.2		ore than one, list	other description		t is the property? Check all that applicingle-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home and	ly.	Do not deduct secured of the amount of any secure Creditors Who Have Clater Current value of the entire property?	
	Number City	Street State	Zip Code		nvestment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
				one.	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about		Check if this is coi (see instructions)	mmunity property

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Debtor	1 Angelis First Name	Middle Name	Anderson Ca	ase number	(if known)	
1.3 <u> </u>	reet address, if available, or ot		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	· ·
N C	umber Street ty State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
]]] c	Who has an interest in the property? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about		Check if this is con (see instructions) such as local	mmunity property
		tion you own for a	property identification number: Ill of your entries from Part 1, including a e			
you own 3. Cars,		equitable interest i u lease a vehicle, als	n any vehicles, whether they are registere so report it on Schedule G: Executory Contrac vcles			
	Make Model: Year:	Toyota Corolla 2013	Who has an interest in the property? one. Debtor 1 only	Check	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information: Current Vehicle	58369	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community proper		Current value of the entire property? \$8425.00	Current value of the portion you own? \$8425.00
3.2	2 Make Model: Year: Approximate mileage: Other information:		instructions) Who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe	er	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?
			Check if this is community proper instructions)	ity (see		

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Debtor 1	Angelis	Anderson Case numbe	r (if known)	
	First Name Middle N			
3.3	Make	Who has an interest in the property? Check		claims or exemptions. Put
	Model: Year:	one. Debtor 1 only	•	ed claims on Schedule D: laims Secured by Property.
	Approximate mileage:	- <u>-</u> .	Creditors who have Cr	aims Secured by Froperty.
		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		entire property:	portion you own:
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
3.4		Who has an interest in the property? Check		claims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year: Approximate mileage:	Debtor 1 only	Creditors who have Cr	aims Secured by Property.
	··· <u> </u>	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.1	Yes Make	Who has an interest in the property? Check	Do not deduct secured of	claims or exemptions. Put
4.1	Make Model:	one. Who has an interest in the property? Check		red claims or exemptions. Put red claims on <i>Schedule D:</i>
	Year:	Debtor 1 only		aims Secured by Property.
	Approximate mileage:	- Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		<u> </u>
		Check if this is community property (see		
		instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured of	claims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cl	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
		vn for all of your entries from Part 2, including any entrie		425.00
	we attached for Part 2 Write that num	ber here	ψο.	120.00

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Debtor 1 Angelis Anderson Case number (if known) Middle Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... (1)TV (1)Cellphone (1)Computer \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... **Used Clothes** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe... **Used Jewelry** \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1300.00 for Part 3. Write that number here

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Den	Tiret Name	Middle Name	Anderson	Case number (# known)	
Part	First Name	Financial Assets	Last Name		
			erest in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No	ve in your wallet, in your home, in a	safe deposit box, and on hand whe	en you file your petition Cash:	
17.	Examples: Checking, s		s; certificates of deposit; shares in o ounts with the same institution, list Institution name:	credit unions, brokerage houses,	
		17.1. Checking account:	First American Bank		\$20.00
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		, or publicly traded stocks	re firms manay market accounts		
	No No	investment accounts with brokerag	ge ilims, money market accounts		
	Yes	Institution or issuer name:			
19.	an LLC, partnership,		ated and unincorporated busine	esses, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	

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Deb	tor 1	Angelis		Anderson	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg	potiable instruments ir n-negotiable instrume No	orate bonds and other negotia nclude personal checks, cashiers' nts are those you cannot transfer	checks, promissory notes, a	and money orders.	
	Ц	Yes. Give specific information about them	Issuer name:			_
21.	Exa	irement or pension mples: Interests in IR		thrift savings accounts, or	other pension or profit-sharing plans	-
	$\mathbf{\Lambda}$	No	Type of account:	Institution name:		
	Ш	Yes. List each account	401(k) or similar plan:	institution name.		_
		separately.	Pension plan:			
			IRA:			-
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			-
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:	Security Deposit with Land	dlord	\$230.00 -
			Prepaid rent:			
			Telephone:			- -
			Water:			
			Rented furniture:			- -
			Other:			
23.	Ann	nuities (A contract for	a periodic payment of money to y	ou, either for life or for a nun	nber of years)	-
	✓	No Yes	Issuer name and description:			
						_
						-

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Debte	or 1 Angelis First Name	N.	/liddle Name	Anderson Last Name	Case number (if known)	
24.	Interests in a	n education IRA, in an	account in a qualit		der a qualified state tuition program	
	_	530(b)(1), 529A(b), and 5	529(D)(1).			
	✓ No Yes	Institution name and des	scription. Separately t	file the records of any interes	ts.11 U.S.C. § 521(c):	
25.		able or future interests or your benefit	in property (other	than anything listed in line	e 1), and rights or powers	
	✓ No					
	Yes. Desc	ribe				
26.	Patents conv		ade secrets, and oth	her intellectual property		
20.				royalties and licensing agree	ements	
	✓ No					7
	Yes. Desc	ribe				
27.	Licenses, fran	nchises, and other gen	neral intangibles			
	Examples: Buil	ding permits, exclusive I	icenses, cooperative	association holdings, liquor	r licenses, professional licenses	
	✓ No					
	Yes. Desc	ribe				
Mon	nev or prope	erty owed to you?				Current value of the
WIOI	ley of prope	fity owed to you?				portion you own? Do not deduct secured
28.	Tax refunds ov	wed to you				claims or exemptions.
		, 				
	✓ No	,				
	Yes. Give s	specific information			Federal:	\$0.00
	Yes. Give s about you a	specific information t them, including whether theady filed the returns	,		Federal: State:	\$0.00 \$0.00
	Yes. Give s about you a and th	specific information t them, including whether already filed the returns he tax years	r			
	Yes. Give s about you a and the	specific information t them, including whether already filed the returns he tax years		hild support, maintenance, div	State:	\$0.00
	Yes. Give s about you a and the	specific information t them, including whether already filed the returns he tax years		hild support, maintenance, div	State: Local:	\$0.00
	Yes. Give s about you a and the Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years		hild support, maintenance, div	State: Local:	\$0.00
	Yes. Give s about you a and the Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon		hild support, maintenance, div	State: Local: vorce settlement, property settlement	\$0.00 \$0.00
	Yes. Give s about you a and the Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon		hild support, maintenance, div	State: Local: vorce settlement, property settlement Alimony:	\$0.00 \$0.00 \$0.00
	Yes. Give s about you a and the Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon		hild support, maintenance, di	State: Local: vorce settlement, property settlement Alimony: Maintenance:	\$0.00 \$0.00 \$0.00 \$0.00
	Yes. Give s about you a and the Family suppor Examples: Past	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon		hild support, maintenance, di	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
30.	Yes. Give s about you a and the Family suppor Examples: Past No Yes. Give s Other amounts	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon specific information	ny, spousal support, ch		State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
30.	Yes. Give s about you a and the Family suppor Examples: Past No Yes. Give s Other amounts Examples: Unpa	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon specific information	ny, spousal support, ch	ability benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
30.	Yes. Give s about you a and the Family suppor Examples: Past No Yes. Give s Other amounts Examples: Unpass Soci	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon specific information s someone owes you aid wages, disability insu ial Security benefits; unpa	ny, spousal support, ch	ability benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
30.	Yes. Give s about you a and the samples: Past Yes. Give s about you a and the samples: Past Yes. Give s Other amounts Examples: Unpass Soci	specific information t them, including whether already filed the returns he tax years rt t due or lump sum alimon specific information s someone owes you aid wages, disability insu ial Security benefits; unpa	ny, spousal support, ch	ability benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Angelis	Anderson	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; heal	th savings account (HSA); credit, ho	meowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from s If you are the beneficiary of a living trust, expect property because someone has died. No Yes. Describe		r are currently entitled to receive	
33.	Claims against third parties, whether or not your Examples: Accidents, employment disputes, insurative No		lemand for payment	
34.	Other contingent and unliquidated claims of to set off claims No Yes. Describe	every nature, including countercl	aims of the debtor and rights	
35.	Any financial assets you did not already list No Yes. Describe			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$250.00
Part	5: Describe Any Business-Related Pr	ronerty You Own or Have a	n Interest In I ist any real estate	in Part 1
37.	Do you own or have any legal or equitable interval. No. Go to Part 6. Yes. Go to line 38.	rest in any business-related propi	· !	Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or commissions you already No Yes. Describe	ndy earned		, острына
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, No Yes. Describe	modems, printers, copiers, fax mach	nes, rugs, telephones, desks, chairs, electro	onic devices

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Deb	tor 1	Angelis		Anderson	Case num	nber (if known)		
40.	Mə	First Name	Middle Name	Last Name use in business, and tools	s of your trade			
40.		No	juipinent, supplies you	use iii busiiless, aliu tool	s or your trade			
		Yes. Describe						
	ш	Too. Describe						
44								
41.		entory						
	$ \angle $	No						
	Ш	Yes. Describe						
	-							
42.		-	ips or joint ventures					
	$\mathbf{\Lambda}$	No		Name of entity:		% of ownership:		
		Yes. Give specific		. tame of or may.		, o o. oe.		
		information about them					_	
						·	_	
							_	
43. (Cust	omer lists, mailing	lists, or other compilat	ions				
	✓	No						
		Yes. Do your lists in	clude personally identifial	ole information (as defined in	11 U.S.C. § 101(41A))?			
		☐ No						
		Yes. Descr	ribe			-		
44.	Αn\	/ business-related r	property you did not alro	eadv list				
	√	No	,,,,	,				
	Ħ	Yes. Give specific		-				
		information						
				-				
45. A	dd tl	he dollar value of a	II of your entries from F	Part 5, including any entrie	s for pages vou have at	tached		
Part	6:	Describe Any F If you own or have ar	Farm- and Commer	cial Fishing-Related in Part 1.	Property You Own o	or Have an Interest	ln.	
46.	Do	you own or have a	ny legal or equitable in	terest in any farm- or com	mercial fishing-related p	roperty?		
	✓	No. Go to Part 7.						value of the
		Yes. Go to line 47.						you own? educt secured
		•					claims	
17	Ea-	rm animals					or exemp	tions
41.			ultry, farm-raised fish					
	✓	No						
		Yes. Describe						
		'						

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Debt	or 1	Angelis First Name	Middle Name	Anderson Last Name	Case number (if known)	
10	C=	ops-either growing		Last Name		
48.		1	Ji ilaivesteu			
		_				
	Ш	Yes. Describe				
					·	
49.	Fa	rm and fishing equip	oment, implements, machinery, fixt	tures, and tools of trade	•	
	✓	No				
		Yes. Describe				
		L				
50.	Fai	rm and fishing supp	lies, chemicals, and feed			
	✓	No				
		Yes. Describe				
51.	An	v farm- and commer	 cial fishing-related property you di	d not already list		
		No	3 , , ,			
	H	Yes. Describe				
					1	
			of your entries from Part 6, includ			
IOI Fa	art O	. Write that number	nere			,
Part	7.	Doscribo All Br	operty You Own or Have an I	Interest in That You	Did Not List Abovo	
			perty of any kind you did not alread		I DIG NOT LIST ADOVE	
			, country club membership	.,		
	✓	No				7
		Yes. Give specific				
		information				
					_	
54. Ac	dd t	he dollar value of all	of your entries from Part 7. Write t	:hat number here		
Part	8:	List the lotals of	of Each Part of this Form			
55. P	art	1: Total real estate, l	ine 2		>	
			_			
		2 total vehicles, line		\$8425.00	<u> </u>	
		•	d household items, line 15	\$1300.00	<u> </u>	
58. P a	art 4	1: Total financial ass	ets, line 36	\$250.00	<u> </u>	
59. P	art	5: Total business-re	lated property, line 45		<u></u>	
60. P	art	6: Total farm- and fi	shing-related property, line 52		<u></u>	
61. P	art	7: Total other prope	rty not listed, line 54			
62. T	ota	personal property.	Add lines 56 through 61	\$9975.00		+ \$9975.00
					Copy personal property total	
						\$9975.00
63. T c	otal	of all property on So	chedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:					
Debtor 1	Angelis		Anderson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois	_	
			(State)		
Case number (If known)				_	

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt				
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Used Furniture Line from Schedule A/B: 06	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
	Brief description: Used Clothes Line from Schedule A/B: 11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property coverd No Yes	3 years after that for ca				

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Debtor 1 Angelis Case number (if known) Anderson First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$400.00 **V** description: \$400.00 (1)TV (1)Cellphone 100% of fair market value, up to any (1)Computer applicable statutory limit Line from 07 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$100.00 **V** description: \$100.00 **Used Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 Brief 735 ILCS 5/12-1001(c) \$8,425.00 **✓** description: Toyota Corolla, 2013, 100% of fair market value, up to any **Current Vehicle** applicable statutory limit Line from Schedule A/B: 03 735 ILCS 5/12-1001(b) Brief \$230.00 **V** description: Security Deposit with 100% of fair market value, up to any Landlord applicable statutory limit Line from Schedule A/B: 22

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			· ·			
Fill in this in	formation to identify your case	:				
Debtor 1	Angelis		Anderson			
200.0.	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if	filing) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	Northern	District of Illinois			
Case numb	or		(State)			
(If known)			_			
Officia	al Form 106D			l		Check if this is a amended filing
Sched	dule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	perty	12/1
Part 1: L 2. List a for ea	es. Fill in all of the information b ist All Secured Claims all secured claims. If a credito	nis form to the court with you below. In has more than one secu- ditor has a particular claim	our other schedules. You have nothing red claim, list the creditor separately is the other creditors in Part 2. As ing to the creditor's name.	else to report on this f Column A Amount of claim Do not deduct the	Column B Value of collateral	Column C Unsecured portion
				value of collateral.	that supports this claim	If any
	DIT ACCEPTANCE tor's Name	Describe the property	that secures the claim:	\$14,020.00	\$8,425.00	\$5,595.00
South City Who I I I Date	sox 513 umber Street chfield Michigan 48037 State ZIP Code owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt debt was 11/1/2015	Contingent Unliquidated Disputed Nature of lien. Check a An agreement you car loan)	made (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
incu	rred		THE HUMBON			
	Add the dollar value of	your entries in Column	A on this page. Write that	\$14,020.00		

number here:

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Filli	in this inform	ation to identify your cas	e:					
Deb	otor 1	Angelis		Anderson				
		First Name	Middle Name	Last Name				
	otor 2 ouse. if filina	First Name	Middle Name	Last Name				
		,						
Unit	ted States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
	se number			(Cidio)				
`	nown)	100=/=						
<u>Ott</u>	ticial F	orm 106E/F					ieck if this is af	n amended filing
Sc	chedu	ile E/F: Cre	ditors Who	Have Unsec	ured Claims			12/15
party 106A that entri knov	/ to any exe VB) and on are listed ir es in the bo vn).	cutory contracts or un Schedule G: Executor a Schedule D: Creditor oxes on the left. Attach	expired leases that could y Contracts and Unexpire s Who Hold Claims Secui	rs with PRIORITY claims at result in a claim. Also list ed Leases (Official Form 100 red by Property. If more spothis page. On the top of a	xecutory contracts on <i>Sch</i> SG). Do not include any cre ace is needed, copy the Pa	edule A/B editors with art you ne	t: Property (O h partially sec ed, fill it out, r	fficial Form cured claims number the
1.	Do any cr	editors have priority ur	secured claims against yo	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, iden much as po Continuation	tify what type of claim it is ossible, list the claims in a on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecur and nonpriority amounts, list the to the creditor's name. If you particular claim, list the other or or this form in the instruction b	hat claim here and show both have more than two priority creditors in Part 3.	n priority an	d nonpriority ar	mounts. As
						Total claim	Priority amount	Nonpriority amount

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Debto		derson Case number (if known)					
	First Name Middle Name Last	t Name					
Part 2	List All of Your NONPRIORITY Unsecured Claims	S					
3. I	Do any creditors have nonpriority unsecured claims against you	u?					
1	No. You have nothing to report in this part. Submit this form to the						
i	✓ Yes.	·					
		order of the creditor who holds each claim. If a creditor has more t	han one priority				
	unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1.						
	• • •	rs in Part 3.If you have more than four priority unsecured claims fill out the					
F	Page of Part 2.	· · ·					
			Total claim				
4.1	ASHRO	Last 4 digits of account number 9610	\$596.00				
	Nonpriority Creditor's Name	Last 4 digits of account number 8610					
	1112 7th Avenue Number Street	When was the debt incurred? 8/1/2010					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	Monroe Wisconsin 53566	Unliquidated					
	City State Zip Code Who incurred the debt? Check one.						
	Debtor 1 only	Disputed					
	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only	Student loans					
		Obligations arising out of a separation agreement or divorce					
	At least one of the debtors and another	that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	✓ Other. Specify CreditCard					
	✓ No	Circle Opecity					
	Yes						
4.2	AT&T	Last A. Parka of account mountain	\$690.00				
	Nonpriority Creditor's Name	Last 4 digits of account number					
	PO Box 105262	When was the debt incurred?n/a					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	Atlanta Georgia 30348						
	City State Zip Code	Unliquidated					
	Who incurred the debt? Check one. Debtor 1 only	Disputed					
	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
		Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce					
	At least one of the debtors and another	that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar					
	Is the claim subject to offset?	debts Other. Specify phone bill					
	✓ No	у опот. Оробну рибие ын					
	Yes						
4.3	CAINE WEINER	1	\$177.00				
	Nonpriority Creditor's Name	Last 4 digits of account number 3704					
	21210 ERWIN STREET Number Street	When was the debt incurred? 10/1/2011					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	WOODLAND California 91367 HILLS	Unliquidated					
	City State Zip Code	Disputed					
	Who incurred the debt? Check one.						
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce					
	At least one of the debtors and another	that you did not report as priority claims					
	님	Debts to pension or profit-sharing plans, and other similar					
	Check if this claim relates to a community debt	debts Collection; Collecting for					
	Is the claim subject to offset?	ORIGINAL CREDITOR: 01					
	No	Other. Specify READYREFRESH BY NESTLE					
	Yes						

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Debtor 1 Angelis Anderson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 cb/carson \$293.00 Last 4 digits of account number ___ Nonpriority Creditor's Name PO BOX 15521 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 19805 Wilmington Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify_ **✓** No Yes 4.5 City of Chicago - Parking and red Light Tickets \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60680 Chicago Illinois Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify License number: A536-0006-1644 **V** No Yes 4.6 FED LOAN SERV \$1,510.00 Last 4 digits of account number ____ Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 1/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No

Yes

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Debtor 1 Angelis Anderson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 GINNY'S INC \$387.00 Last 4 digits of account number Nonpriority Creditor's Name 1112 7TH AVE POB 2816 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **MONROE** Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify_ **✓** No Yes 4.8 JEFFERSON CAPITAL SYST \$1,597.00 Last 4 digits of account number 9003 Nonpriority Creditor's Name 16 MCLELAND RD When was the debt incurred? 6/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 UnknownLoanType Other. Specify **✓** No ☐ Yes Montgomery Ward 4.9 \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name 3650 Milwaukee Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Madison Wisconsin 53714 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify ___ Credit Card **✓** No

Yes

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Debtor 1 Angelis Anderson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** RECEIVABLES PERFORMANC 4.10 \$386.00 Last 4 digits of account number Nonpriority Creditor's Name 20816 44th Avenue W When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent 98036 Lynnwood Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: DISH Yes SEVENTH AVE 4.11 \$133.00 Last 4 digits of account number 8610 Nonpriority Creditor's Name 1112 7th Ave When was the debt incurred? 8/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Monroe Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.12 UNIVERSITY OF PHOENIX \$2,210.00 Last 4 digits of account number _ Nonpriority Creditor's Name 4615 E ELWOOD ST FL 3 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent PHOENIX Arizona 85040 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ 001 InstallmentLoan **✓** No

Yes

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tor 1 Angelis			Anderson	ase number (if known)
First Name	1	Middle Name	Last Name	
3: List Others	to Be Notified	About a Debt	That You Already Listed	
collection agency agency here. Simi you do not have	is trying to collect	from you for a de	ebt you owe to someone else, list t	nat you already listed in Parts 1 or 2. For example, if a he original creditor in Parts 1 or 2, then list the collecti sted in Parts 1 or 2, list the additional creditors here. I ill out or submit this page.
Dish Network Name			On which entry in Part 1 or	Part 2 did you list the original creditor?
ivaille			•	
9601 S Meridian E	Blvd		Line 4.10 of (Chec	Part 1: Creditors with Priority Unsecured Clain
Number Stree	umber Street		one):	Part 2: Creditors with Nonpriority Unsecured Claims
Englewood	Colorado	80112	Last 4 digits of account nu	mber 1318
City	State	Zip Code		
HARRIS & HARR	RIS LTD			
Name			On which entry in Part 1 or	Part 2 did you list the original creditor?
111 W JACKSON	BLVD S-400		Line 4.5 of (Chec	k Part 1: Creditors with Priority Unsecured Clain
Number Stree	t		one):	Part 2: Creditors with Nonpriority Unsecured Claims
CHICAGO	Illinois	60604	Last 4 digits of account nu	mber
City	State	Zip Code		

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Debtor 1 Angelis Anderson Case number (if known) Middle Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$1,510.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$8,669.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$10,179.00

6 j.

6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:							
Debtor 1	Angelis		Anderson				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	First Name	Middle Name	Middle Name Last Name				
United States B	ankruptcy Court for the:	Northern	District of Illinois				
Case number (State) (If known)							

Official Form 106G

Check if this is a
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company w	rith whom you have	the contract or lease	State what the contract or lease is for
2.1	Orchard Place of Englewood Name			Other, Other, Landlord
	6333 S Sangamon St			
	Number Street			
	Chicago Illinois 60621			
	City	State	Zip Code	

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Fill ir	n this inforr	mation to identify your cas	e:		
Debt	tor 1	Angelis		Anderson	
		First Name	Middle Name	Last Name	
Debt					
(Spo	use, if filin	g) First Name	Middle Name	Last Name	
Unite	ed States E	Bankruptcy Court for the:	Northern	District of Illinois	
				(State)	
Case (If kn	e number own)				
(Check if this is an
					amended filing
Off	icial I	Form 106H			
Scl	hedu	le H: Your Co	odebtors		12/15
2. \(\)	No Yes Within the daho, Lou No. 0 Yes. 1	e last 8 years, have you isiana, Nevada, New Mex Go to line 3.	Q .	shington, and Wisconsin.)	debtor.) Inmunity property states and territories include Arizona, California,
			state or territory did you live?	Fill ir	the name and current address of that person.
		Name of your spouse, for	ormer spouse, or legal equiv	/alent	_
		Number Street			_
		City	State	Zip Code	_
a	again as a	codebtor only if that p	erson is a guarantor or co	osigner. Make sure you hav	our spouse is filing with you. List the person shown in line 2 re listed the creditor on <i>Schedule D</i> (Official Form 106D), refer to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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Fill in this information to identif	v vour coco:				
	y your case.	A - 1			
Debtor 1 Angelis First Name	Middle Name	Anderson Last Name			
Debtor 2				Check if this is:	
(Spouse, if filing) First Name	Middle Name	Last Name		An amended filing	
United States Bankruptcy Court for the:	Northern	_ District of Illinois (State)		A supplement showing post-petition expenses as of the following date:	chapter 1
Case number (If known)		(Glate)		MM / DD / YYYY	
Official Form 106I			<u>l</u>		
Schedule I: Your Inc	come				12/1
	r spouse. If more spa ame and case number	ce is needed, a	ttach a separat	spouse is not filing with you, do ne sheet to this form. On the top of stion.	
Fill in your employment		Debtor 1		Debtor 2	
information. If you have more than one	Employment status	Employed		Employed	
job,		✓ Not Employe	d	Not Employed	
attach a separate page with information about additional employers.	Occupation				
	Employer's name	-			
Include part time, seasonal, or self-employed work.	Employer's address	Number Street		Number Street	
Occupation may include student					
or homemaker, if it applies.		City	State Zip Co	de City State Zip Co	nde
	How long employed there?				
you are separated. If you or your non-filing spouse have meattach a separate sheet to this form.	date you file this form. If you	ne the information for	all employers for that	\$0 in the space. Include your non-filing spouse person on the lines below. If you need more spouse for Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions.) If not paid monthly, ca			\$(0.00	
3. Estimate and list monthly over	time pay.	3.	+ \$(0.00	

4. Calculate gross income. Add line 2 + line 3.

\$0.00

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Debtor 1 Angelis First Name	Middle Name	Anderson Last Name	Case number	(if known)	
Filst Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		→ 4.	\$0.00		
5. List all payroll deduction					
	Social Security deductions	5a.	\$0.00		
5b. Mandatory contrib	outions for retirement plans	5b.	\$0.00		
5c. Voluntary contribu	utions for retirement plans	5c.	\$0.00		
5d. Required repayme	ents of retirement fund loans	5d.	\$0.00		
5e. Insurance		5e.	\$0.00		
5f. Domestic support	obligations	5f.	\$0.00		
5g. Union dues	3	5g.	\$0.00		
5h. Other deductions.	Specify:	-	\$0.00	<u> </u>	
	tions. Add lines 5a + 5b + 5c + 5d + 5e +5f	-	\$0.00	·	
+5h.		-			
7. Calculate total monthly	y take-home pay. Subtract line 6 from line	4. 7. <u> </u>	\$0.00		
8. List all other income re					
business, profess	ental property and from operating a ion, or farm or each property and business showing gro	ss			
	d necessary business expenses, and the to		\$0.00		
8b. Interest and divide	ends	8b.	\$0.00		
8c. Family support pa dependent regular	yments that you, a non-filing spouse, or ly receive	r a			
	usal support, child support, maintenance, and property settlement.	8c. <u> </u>	\$0.00		
8d. Unemployment co	empensation	8d.	\$0.00		
8e. Social Security		8e.	\$799.00		
Include cash assistar assistance that you re the Supplemental No subsidies	assistance that you regularly receive nce and the value (if known) of any non-cash eceive, such as food stamps (benefits under utrition Assistance Program) or housing				
Specify: Food Assist	tance Programs Income	8f.	\$194.00		
8g. Pension or retiren	nent income	8g	\$0.00		
8h. Other monthly inc	ome. Specify: Daughter Contribution	8h. +	\$400.00	+ <u></u>	
9. Add all other income A	Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9	\$1,393.00		
10. Calculate monthly inc. Add the entries in line 1	ome. Add line 7 + line 9. 0 for Debtor 1 and Debtor 2 or non-filing sp	10	\$1,393.00	+	= \$1,393.00
Include contributions from relatives.	r contributions to the expenses that you m an unmarried partner, members of your ho unts already included in lines 2-10 or amoun	ousehold, your depe	ndents, your roommates		
Specify:					11. + \$0.00
	e last column of line 10 to the amount in e Summary of Schedules and Statistical Sun				12. \$1,393.00
write that amount on the	s durimally of deflectules and dialistical duri	ilinary of Gertalii Liak	nillies and Nelaled Dale	a, ii it applies	Combined monthly income
	rease or decrease within the year after ye	ou file this form?			monuny moonle
No.					
Yes. Explain:					

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Fill in this inform	nation to identify y	our case:				
Debtor 1	Angolic		Anderson			
Debior	Angelis First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing		
United States E	Bankruptcy Court fo	or the: Northern	District of Illinois (State)	A supplement sho	wing post-petition chapter 13	
Case number			(Gidio)	expenses as or the	Fioliowing date.	
(If known)				MM / DD / YYYY		
Official	Form 106	3.1				
Schedu	le J: You	r Expenses				12/15
		possible. If two married people are				
	more space is ne wer every questic	eded, attach another sheet to this ton.	form. On the top of any addition	al pages, write your nar	ne and case number	
	cribe Your Ho					
1. Is this a join		usenoiu				
	to line 2					
Yes. Do	oes Debtor 2 live	in a separate household?				
	No					
	Yes. Debtor 2 n	nust file Official Forms 106J-2, Expens	ses for Separate Household of Deb	otor 2.		
2. Do you hav	 е	✓ No				
dependents?		_				
Do not list Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
	penses include f people other	✓ No				
than yourself and	d vour	Yes				
dependents		_				
Part 2: Estin	mate Your Ong	going Monthly Expenses				
	of a date after the	your bankruptcy filing date unless y bankruptcy is filed. If this is a sup				
	•	non-cash government assistance uded it on Schedule I: Your Income	•		Your expenses	
		hip expenses for your residence. In	,		¢49	6 00
	r the ground or lot.		olado inol mongago paymonio ana		\$186 4.	<u>).UU</u>
	uded in line 4:					
4a. Real es	state taxes				4a \$0	0.00
4b. Proper	ty, homeowner's, c	or renter's insurance			4b \$0	0.00
4c. Home r	maintenance, repai	r, and upkeep expenses			4c. \$0	0.00
4d. Homed	owner's association	or condominium dues			4d. \$0	0.00

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Anderson

Debtor 1

Case number (if known) Angelis First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$70.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$100.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$275.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$80.00 10. Personal care products and services \$80.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$75.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$412.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1			Anderson	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly	expenses.				\$1,378.00
22a. <i>A</i>	Add lines 4 through 2	1.				\$0.00
22b. C	Copy line 22 (monthly	expenses for Debtor 2), if any, fro	m Official Form 106J-2			\$1,378.00
22c. A	add line 22a and 22b.	The result is your monthly expens	es.		22.	
23.Calcu	late your monthly r	net income.				
23a. C	Copy line 12 (your cor	mbined monthly income) from Sch	edule I.		23a	\$1,393.00
23b. C	Copy your monthly exp	penses from line 22 above.			23b	\$1,378.00
23c. S	Subtract your monthly	expenses from your monthly incor	ne.			\$15.00
	The result is your mo	nthly net income.			23c	
24. Do vo	ou expect an increa	se or decrease in your expense	es within the vear after you	ı file this form?		
_	•					
		ect to finish paying for your car loar rease or decrease because of a m				
	No		, , , , , , , , , , , , , , , , , , , ,			
	10					
∐ \	⁄es					
	Explain here	9:				

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Fill in this inform	nation to identify your cas	e:		
Debtor 1	Angelis		Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and
×	/s/ Angelis Anderson	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 10/7/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in this	informa	ition to identify your cas	e:					
Debtor 1		Angelis		Ande	reon			
DCDIOI 1		First Name	Middle I		Name	-		
Debtor 2 (Spouse, i	f filina)	First Name	Middle 1	Name Last N	Name	_		
				District of II				
United Sta	ales da	nkruptcy Court for the:	Northern		State)	_		
Case num (If known)	ber					_		
Officia	al F	orm 107				<u></u>		Check if this is ar amended filing
Be as com	plete a	and accurate as possi	ble. If two marrie		ether, both are e	qually responsi	ble for supplying	12/15 correct information. If more known). Answer every
	Give [Details About You	r Marital Statu	ıs and Where You	Lived Before			
1. Wh	nat is y	our current marital st	atus?					
□	Marri							
2. Du	ring the	e last 3 vears, have vo	u lived anvwhere	other than where you	live now?			
□	No Yes. L	ist all of the places you l	ived in the last 3 ye	ears. Do not include whe	re you live now.			
	Debto	or 1:		Dates Debtor 1 lived there	d Debtor 2:			Dates Debtor 2 lived there
					Same	as Debtor 1		Same as Debtor 1
		S Merrill Ave er Street		From 10/2013	Number St	reet		From
			00047	To <u>9/30/2016</u>	-			То
	Chica City	go Illinois State	60617 Zip Code		City	State	Zip Code	
					Same	as Debtor 1		Same as Debtor 1
	Numb	er Street		From	Number St	reet		From
	City	State	Zip Code		City	State	Zip Code	
			-		•		•	
territo	<i>ries</i> ind No	clude Arizona, California	, Idaho, Louisiana,	buse or legal equivaler, Nevada, New Mexico, ebtors (Official Form 106	Puerto Rico, Texas			mmunity property states and

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Debte	or 1	Angelis First Name Middle		nderso		number	(if known)	
Part 2	2-	Explain the Sources of Your I		aot i tairi				
4. I	Did Fill in	you have any income from employmenthe total amount of income you receive rities. If you are filing a joint case and you No Yes. Fill in the details.	ent or from operating d from all jobs and all b	usines	ses, including part-time			ears?
			Debtor 1			Del	otor 2	
			Sources of income Check all that apply.		Gross income (before deductions and exclusions)		urces of income eck all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business				Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business				Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business				Wages, commissions, bonuses, tips Operating a business	
lr b c	ene ase	you receive any other income during to de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received to each source and the gross income from the No Yes. Fill in the details.	ome is taxable. Exampl terest; dividends; mone ogether, list it only once	es of o y colled under	ther income are alimony; ct cted from lawsuits; royalties Debtor 1.	s; and (ambling and lottery wini	
	_		Debtor 1			De	ebtor 2	
			Sources of income Describe below.	•	Gross income from each source (before deductions and exclusions)		ources of income escribe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until he date you filed for bankruptcy:	\$194 monthly from L \$799 monthly from S		\$1,746.00 \$7,191.00	_		
		For last calendar year: January 1 to December 31, 2015) YYYYY	\$194 monthly from L \$799 monthly from S		\$2,328.00 \$9,588.00	_		
		For the calendar year before that: January 1 to December 31, 2014) YYYYY	\$194 monthly from L		\$2,328.00 \$9,588.00			

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	ingelis irst Name		Middle Name	Anderson Last Name	Case num	ber (if known)	
Li	ist Certain	Payments	You Made Be	efore You Filed for	Bankruptcy		
					•		
_			-	ily consumer debts?			
] No			ebtor 2 has prima amily, or househo		Consumer debts are defined	in 11 U.S.C. § 101(8) as "inc	urred by an individual
	During the 9	00 days before	you filed for bank	kruptcy, did you pay any cre	editor a total of \$6,425* or m	ore?	
	No. Go	to line 7.					
	to	otal amount yo	ou paid that credit	or. Do not include paymen	* or more in one or more pay its for domestic support obliq o an attorney for this bankrup	gations, such as	
	* Subject to	adjustment or	n 4/01/19 and eve	ry 3 years after that for cas	ses filed on or after the date	of adjustment.	
Yes	s. Debtor 1 o	r Debtor 2 oı	both have prim	narily consumer debts.			
-	During the 9	0 days before	you filed for bank	kruptcy, did you pay any cre	editor a total of \$600 or more	9?	
	✓ No. Go	to line 7.					
	th	nat creditor. D	o not include pay	ments for domestic supporments to an attorney for the	r more and the total amount rt obligations, such as child is bankruptcy case. Total amount paid	support and Amount you still owe	Was this payment
				Dates of payment	Total althourit paid	Amount you still owe	for
Cr	reditor's Name)					Mortgage Car
Nu	umber Street						Credit card Loan repaymen
_							Suppliers or
Ci	ty	State	Zip Code				vendors Other
Cr	reditor's Name)					☐ Mortgage ☐ Car
Νι	umber Street						Credit card
_							Loan repaymen
Ci	ty	State	Zip Code				Suppliers or vendors
			· 				Other
Cr	reditor's Name)					Mortgage
NJ.	Imbor Ctroot						Car
NU	umber Street						Credit card Loan repaymen
							Suppliers or
Ci	ty	State	Zip Code				vendors

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Deb	tor 1	Angelis				erson	Case number (if	known)
		First Name		Middle Name	Last	Name		
	Insic corp ager	lers include your rorations of which	relatives; any you are an o or a business	general partners; fficer, director, per	relatives of any gorson in control, or o	eneral partners; par owner of 20% or mo	ore of their voting sec	no was an insider? Du are a general partner; Burities; and any managing mestic support obligations,
	✓	No						
		Yes. List all paym	ents to an in	sider.				
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
		Insider's Name						
		Number Street						
		City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				
	insic	ler?				payments or trans	fer any property or	n account of a debt that benefited an
	_	de payments on c No	lebts guarant	eed or cosigned b	y an insider.			
	=	Yes. List all paym	ents that ben	efited an insider.				
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
								Include creditor's name
		Insider's Name						
		Number Street						
	_	City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				

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Deb	otor 1		AC.18 A.		Anderson	C	ase number (if ki	nown)		
		First Name	Middle Name		Last Name					
Part	t 4:	Identify Legal	Actions, Reposses	sions,	and Foreclosure	S				
	List a		ou filed for bankruptcy, uding personal injury cas							ns, and
	✓	No								
		Yes. Fill in the detail	S.							
				Nature	of the case	Court or a	agency		Status of the ca	se
		Case title							Pending	
						Court Nam	ne		On appeal	
		Case number				NumberSti	reet		Concluded	
						City	State	Zip Code		
		Case title							Pending	
						Court Nam	ne		On appeal	
		Case number				NumberSti	reet		Concluded	
						Numbersu	leet		_	
						City	State	Zip Code		
						City	State	Zip Code		
		No. Go to line 11. Yes. Fill in the infor	mation below.		Describe the prop	erty		Date	Value of t property	he
		Craditaria Nama								
		Creditor's Name			Explain what happ	ened				
		Number Street								
					Property was re	possessed.				
					Property was fo	reclosed.				
					Property was g					
		City	State Zip Coo	de	Property was at	· · · · ·	or levied.			
					Describe the prop	erty		Date	Value of t property	ne
		0 - 12 - 1 - 22								
		Creditor's Name			Explain what happ	ened				
		Number Street								
					Property was re	epossessed.				
					Property was fo					
					Property was g					
		City	State Zin Coo	de .	Property was at	tached seized	or levied			

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Deb	tor 1	Angelis	Anderson	Case number (if known)		
		First Name Middle Name	Last Name			
11.		hin 90 days before you filed for bankruptcy, did an ounts or refuse to make a payment because you o		nk or financial institution, s	et off any amoun	s from your
	✓	No Yes. Fill in the details.				
			Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name				
		Number Street	Last 4 digits of account nur	mber: XXXX-		
			•			
		City State Zip Code				
12.		nin 1 year before you filed for bankruptcy, was an ointed receiver, a custodian, or another official?	y of your property in the po	essession of an assignee fo	or the benefit of c	reditors, a court-
		No Yes				
Part	5:	List Certain Gifts and Contributions				
13.	Wi	thin 2 years before you filed for bankruptcy, did y	ou give any gifts with a tot	al value of more than \$600	per person?	
			, , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	✓	No				
	Ш	Yes. Fill in the details for each gift.			_	
		Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift				
		Number Street				
		City State Zip Code				
		Person's relationship to you				
		Person to Whom You Gave the Gift				
		Number Street				
		City State Zip Code				
		Person's relationship to you				

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ebtor 1	Angelis	Anderson Case number (if k	nown)	
	First Name Middle Name	Last Name		
Wit	hin 2 years before you filed for bankruptcy, did	you give any gifts or contributions with a total valu	e of more than \$600	to any charity?
Wit	No	,		,
H	Yes. Fill in the details for each gift or contribution.			
ш		Describe substance southibuted	Deta	Value
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	that total more than \$000		Continuated	
	Charity's Name			
	-			
	-			
	Number Street			
	City State Zip Code			
	Oity State Zip Code			
t 6:	List Certain Losses			
	Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule</i>	Date of your loss	Value of property lost
		A/B: Property.		
		112. 1 Toporty.		
				-
7.	List Certain Payments or Transfers			
✓ □	No Yes. Fill in the details.	Description and value of any property transferred	Date payment or transfer	Amount of payment
		uansierieu	was made	payment
	Person Who Wee Poid			
	Person Who Was Paid			
	Number Street			
	City State Zip Code			
	English the Albert			
	Email or website address			
	Person Who Made the Payment, if Not You			
	Person Who Was Paid		-	-
	Number Street			
	City State Zip Code			
	Email or website address			
	LITIAII OF WEDSILE AUDIESS			
	Person Who Made the Payment, if Not You			

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Deb	tor 1	Angelis		Anderson	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credit not include any payment or tra No Yes. Fill in the details.	ors or to make payment		our behalf pay or transfer	any property to any	one who promised to
	ш	ros. i ili ili tro dotallo.		5			
				Description and value of transferred	any property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers an sfers that you have already lis No Yes. Fill in the details.		urity (such as the granting of			Oo not include gifts and
				Description and value or property transferred		y property or eceived or debts pai	Date d transfer was made
		Person Who Received Tra	nsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code u				
		Person Who Received Tra	nsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code u				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to	a self-settled trust or simil	lar device of which y	ou are a beneficiary?
	V	No Yes. Fill in the details.					
	Ц	res. Fill III the details.		Description and value	of the property transferred	l	Date transfer was made
		Name of trust					

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Debtor	r 1	Angelis First Name M	iddle Name		Anderson Last Name	C	ase number (if known)		
Part 8		List Certain Financial Acco		ıments		xes, a	and Storage Units		
20. V n lr	With nov	nin 1 year before you filed for bar ved, or transferred? Ide checking, savings, money marke peratives, associations, and other fir	nkruptcy, were	any finar	ncial accounts or instr	ument	s held in your name, or fo	-	
[✓	No Yes. Fill in the details.		Last 4 number	digits of account		of account or rument	Date account was	Last balance before
								closed, sold, moved, or transferred	closing or transfer
		Person Who Was Paid		XXXX-			Checking Savings		
		Number Street					Money market Brokerage Other		
		City State 2	Zip Code						
		Person Who Was Paid		XXXX-			Checking Savings		
		Number Street					Money market Brokerage		
		City State 2	Zip Code				Other		
		you now have, or did you have with the valuables? No Yes. Fill in the details.		-	iled for bankruptcy, ar	y safe	deposit box or other deposit b		Do you still
							_		have it?
		Name of Financial Institution		Name			_		☐ No ☐ Yes
		Number Street		Number	Street	0 - 1 -	_		
		City State Zi	p Code	City	State Zip	Code			
22. F	łav	e you stored property in a storag		other tha	an your home within 1	year b	pefore you filed for bankr	uptcy?	
	Z	No Yes. Fill in the details.							
				Who else	e had access to it?		Describe the conte	ents	Do you still have it?
		Name of Storage Facility	i	Name			_		☐ No ☐ Yes
		Number Street		Number	Street		_		□
		City State Zi	p Code	City	State Zip	Code			

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	Angelis	Anderson		se number (if known)	
	First Name Middle Name	Last Name			
rt 9:	Identify Property You Hold or Cor	ntrol for Someone E	se		
. Do	you hold or control any property that som	eone alse owns? Include	any property you b	porrowed from are storing for or hold i	n trust for
	meone.	leone eise owns: include	any property your	on towed from, are storing for, or floid in	ii tiust ioi
	Livia				
¥	No Yes. Fill in the details.				
_	res. Fill liftile details.	Where is the prope	4v2	Describe the contents	Value
		where is the proper	ty r	Describe the contents	Value
	Owner's Name	Number Street			
		_			
	Number Street				
		City State	Zip Code		
	City State Zip Code	_			
ort 10.	Give Details About Environment	al Information			
art 10:	Give Details ADOUT ETIVITOTIMENT	ai iiiiOiiiIaliOii			
or the	purpose of Part 10, the following definitions app	oly:			
-	Environmental law means any federal, state, or	local statute or regulation of	oncerning pollution, o	contamination, releases of	
	hazardous or toxic substances, wastes, or mate				
İ	including statutes or regulations controlling the	cleanup of these substance	es, wastes, or materia	al.	
	Site means any location, facility, or property as o	•	ntal law, whether you	now own, operate, or utilize it	
(or used to own, operate, or utilize it, including of	disposal sites.			
-	Hazardous material means anything an environ	mental law defines as a haz	ardous waste, hazard	lous substance,	
1	toxic substance, hazardous material, pollutant,	contaminant, or similar term			
eport	all notices, releases, and proceedings that you	know about, regardless of w	hen they occurred.		
•			·		
. Ha	s any governmental unit notified you that y	vou may be liable or note			
		you may be hable or pole	ntially liable under	or in violation of an environmental law?	
	No	you may be hable or pote	ntially liable under o	or in violation of an environmental law?	
ř	No Yes, Fill in the details.	you may be hable or pote	ntially liable under o	or in violation of an environmental law?	
	No Yes. Fill in the details.		ntially liable under o		
		Governmental unit	ntially liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice
	Yes. Fill in the details.	Governmental unit	ntially liable under o		Date of
			ntially liable under o		Date of
	Yes. Fill in the details. Name of site	Governmental unit	ntially liable under o		Date of
	Yes. Fill in the details.	Governmental unit	ntially liable under o		Date of
	Yes. Fill in the details. Name of site	Governmental unit			Date of
Ě	Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Number Street			Date of
¥Ľ	Yes. Fill in the details. Name of site	Governmental unit Governmental unit Number Street			Date of
. Ha	Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
5. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
i. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State ny release of hazardous in	Zip Code	Environmental law, if you know it	Date of notice
. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State	Zip Code		Date of notice
5. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State ny release of hazardous in	Zip Code	Environmental law, if you know it	Date of notice
i. Ha	Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit Governmental unit Number Street City State ny release of hazardous in	Zip Code	Environmental law, if you know it	Date of notice
;. На Г	Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State ny release of hazardous i Governmental unit	Zip Code	Environmental law, if you know it	Date of notice
i. Ha	Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State ny release of hazardous i	Zip Code	Environmental law, if you know it	Date of notice
. Ha	Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State ny release of hazardous i Governmental unit Governmental unit Number Street	Zip Code	Environmental law, if you know it	Date of notice
ў. На Г	Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State ny release of hazardous i Governmental unit	Zip Code	Environmental law, if you know it	Date of notice

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Debt	tor 1	Angelis		NAC-L-II - N	Anderson	Case r	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	ative proceeding under	any environmental	law? Include settlements and orders	s.
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
		Case title						case
		——————————————————————————————————————						Pending
				_	Court Name			On appeal
		Case number		<u> </u>	Number Street			Concluded
					0			Concluded
		_			City State	Zip Code		
Part	11:	Give Details A	bout Your	Business or	Connections to An	y Business		
27.	\A/i+i	nin 4 years before	you filed for I	ankruntev did	vou own a business or	have any of the fol	llowing connections to any business	.2
21.	VVILI		you med for i	Janki upicy, ulu	you own a business or	nave any or the for	nowing connections to any business) f
					profession, or other activit		part-time	
		=	-	company (LLC)	or limited liability partners	ship (LLP)		
		A partner in a		ing executive of	a corporation			
			_	-	a corporation / securities of a corporatio	n		
					, coodinate of a corporation			
		No. None of the abo			s below for each business			
	Ш	res. Check all that a	appiy above ar	ia iii in the details			Employer Identification n	umber De net
					Describe the natu	re of the business	Employer Identification n include Social Security nu	
							EIN:	
		Business Name						
		Number Street			_		Dates business existed	
		Number Street			Name of accounta	ant or bookkeeper		
		City	State	Zip Code	_		From To	
					Describe the natu	re of the business		
							include Social Security nu	imber or IIIN.
		Business Name			_		EIN:	
					_			
		Number Street			Name of accounts	ant or bookkeeper	Dates business existed	
		Cit.	Otata	7:- 0 - 1	_		From To	
		City	State	Zip Code			10	
					Describe the natu	re of the business	Employer Identification n	umber De net
					Describe the natu	re of the business	Employer Identification n include Social Security nu	
					_		EIN:	
		Business Name						
		Number Street			_		Dates business existed	
		Number Street			Name of accounta	ant or bookkeeper		
		City	State	Zip Code	_		From To	
		,		,				

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Debto	or 1	Angelis			Anderson	Case number (if known)
		First Name		Middle Name	Last Name	
	cred	itors, or other parti No	ies.	oankruptcy, did yo	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
	Ш	Yes. Fill in the details	s below.			
					Date issued	
		Nomo			MM/DD/YYYY	
		Name			WIW, DD, TTTT	
		Number Street			-	
		City	State	Zip Code	-	
Part '		Sign Below				
tr	ue a	nd correct. I under	stand that m	naking a false state	ement, concealing proper	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		x /s/ A	ngelis Ander	son		x
		Signatur	re of Debtor 1			Signature of Debtor 2
		Date 1	0/7/2016			Date
	N	ou attach additiona		our Statement of I	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
D	id yo	ou pay or agree to p	oay someon	e who is not an att	orney to help you fill out b	ankruptcy forms?
Ī.	N	0				
Ī	Y	es. Name of person				Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	Angelis		Anderson	_	
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filin	g) First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the:		Northern	District of Illinois	_	
Case number (State) (If known)					

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: CREDIT ACCEPTANCE Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 072 Automobile Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Angelis		Anderson	Case number (if
1	First Name	Middle Name	Last Name	known)
ict Vou	r Unavairad	Porconal Property Leases		Part 2:
For any informat	unexpired perstion below. Do		ed leases are leases that are	Contracts and Unexpired Leases (Official Form 106G), fill in the still in effect; the lease period has not yet ended. You may assume 65(p)(2).
Des	cribe your une	xpired personal property leases		Will the lease be assumed?
Less	sor's name: Ore	chard Place of Englewood		□ No ✓ Yes
	cription of leased erty: Landlord	d		
Less	sor's name:			No Yes
Des	cription of leased erty:	d		
Less	sor's name:			□ No □ Yes
Des prop	cription of leased erty:	d		
Less	sor's name:			☐ No ☐ Yes
Des prop	cription of leased erty:	d		
Less	sor's name:			No Yes
Des	cription of leased erty:	d		
Less	sor's name:			□ No □ Yes
Des	cription of leased erty:	d		
Less	sor's name:			No Yes
Des	cription of leased erty:	d		
Unde		rjury, I declare that I have indicate ject to an unexpired lease.	d my intention about any pro	operty of my estate that secures a debt and any personal
	s/ Angelis Ande		<u> </u>	
Sig	gnature of Debto	or 1	Sign	ature of Debtor 1
Da	ate 10/7/2016 MM/DD/YY	YY	Date	MM/DD/YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Angelis Anderson		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSATIO	ON OF ATTORNEY FO	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F that compensation paid to me within services rendered or to be rendered is as follows:	one year before the filir	ng of the petition in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to	accept		\$1,250.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,250.00
2.	The source of the compensation paid	d to me was:		
	Debtor	Other (spec	cify)	
3.	The source of the compensation paid	d to me is:		
	✓ Debtor	Other (spec	cify)	
4.	I have not agreed to share the a members and associates of my	bove-disclosed compen	nsation with any other person unles	s they are
		aw firm. A copy of the a	on with a other person or persons w greement, together with a list of th	
5.	In return for the above-disclosed fee a. Analysis of the debtor's finance bankruptcy;	_	er legal service for all aspects of the ring advice to the debtor in determ	
	b. Preparation and filing of any	petition, schedules, stat	tements of affairs and plan which n	nay be required;
	c. Representation of the debtor	at the meeting of creditor	ors and confirmation hearing, and a	any adjourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee do	oes not include the following servic	es:
		CERTIFI	ICATION	
	I certify that the foregoing is a complence debtor(s) in this bankruptcy proceed		reement or arrangement for payme	ent to me for representation
	10/7/2016		/s/ Elizabeth Placek	
	Date		Signature of Attorney	
			Semrad Law Firm	
	_		Name of law firm	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re: _	Anderson, Angelis	Case No.	Case No.	
	Debtor(s)	0000 110.		
		Chapter.	Chapter7	
	VERIFICATION	ON OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the	e attached list of creditors is true	and correct to the best of th	eir knowledge.
Doto:	107/0016	/a/ Anderson, An	aglia	
Date:	10/7/2016	/s/ Anderson, An Anderson, Angel	<u> </u>	
		Signature of Deb		

CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037

UNIVERSITY OF PHOENIX 4615 E ELWOOD ST FL 3 PHOENIX , AZ 85040

JEFFERSON CAPITAL SYST PO BOX 7999 c/o Amy Payment Saint Cloud , MN 56302

FED LOAN SERV P.O. Box 60610 Harrisburg, PA 17106

ASHRO 1112 7th Avenue Monroe , WI 53566

GINNY'S INC 1112 7TH AVE POB 2816 MONROE, WI 53566

RECEIVABLES PERFORMANC 20816 44th Avenue W Lynnwood , WA 98036

Dish Network 9601 S Meridian Blvd Englewood , CO 80112

cb/carson PO BOX 15521 Wilmington , DE 19805

CAINE WEINER 21210 ERWIN STREET WOODLAND HILLS , CA 91367

SEVENTH AVE 1112 7th Ave Monroe , WI 53566

Montgomery Ward 3650 Milwaukee Street Case 16-32131 Doc 1 Filed 10/07/16 Entered 10/07/16 13:23:09 Desc Main Document Page 59 of 69

Madison, WI 53714

AT&T PO Box 105262 Atlanta , GA 30348

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago , IL 60602

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

n re	Angelis Anderson	Northern District of		
-	Debtor Debtor		Case No.	(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATION (OF ATTORNEY FO	OR DERTOR
1	. Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behalf	Fed. Bankr. P. 2016(b), I certify that e year before the filing of the petition	at I am the attorney for the abo	venamed debtor(s) and that
	For legal services, I have agreed to a			\$1,250.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,250.00
2	. The source of the compensation paid	d to me was:		NAMES AND ASSESSMENT OF THE PARTY OF THE PAR
	Debtor	Other (specify)		A.A. S
3.	. The source of the compensation paid	d to me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the ab members and associates of my l	oove-disclosed compensation with aw firm.	any other person unless they	are
	I have agreed to share the above members or associates of my law the people sharing in the compe	-disclosed compensation with a or v firm. A copy of the agreement, to nsation, is attached.	ther person or persons who ar gether with a list of the names	re not s of
5.	In return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy;	I have agreed to render legal servi cial situation, and rendering advice	ce for all aspects of the bankri e to the debtor in determining	uptcy case, including: whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statements of	affairs and plan which may be	required;
	c. Representation of the debtor	at the meeting of creditors and cor	nfirmation hearing, and any ac	ljourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee does not inclu	ude the following services:	
		CERTIFICATION	ı	
l debt	certify that the foregoing is a complet- or(s) in this bankruptcy proceedings.	e statement of any agreement or ar	rangement for payment to me	for representation of the
	10/7/2016		/s/ Elizabeth Placek	
	Date	***************************************	Signature of Attorney	
			Semrad Law Firm	
	•		Name of law firm	

10/7/2016 title

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$30.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

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10/7/2016 title

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 10/7/2016

0.0

Attorney Charles Plan

Inifia _____

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Debtor 1 Angelis First Name		Anderson	Case number (if knot	wnj		
	Middle Name lestions for Reporting Purpose	Last Name				
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No.	er 7. Do you estimate		operty is excluded and administrative ed creditors?		
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5 5,001-1 10,001-	0,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?		\$10,000 \$50,000	001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be? Part7: Sign Below	∑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
For you	f I have chosen to file under Cl of title 11, United States Code, under Chapter 7. If no attorney represents me an out this document, I have obtai I request relief in accordance w I understand making a false sta	hapter 7, I am aware I understand the re I understand the re I d I did not pay or ag ined and read the no ith the chapter of til I tement, concealing ase can result in fir 1519, and 3571.	that I may proceed, if a elief available under eac gree to pay someone w otice required by 11 U.s ale 11, United States Co property, or obtaining	ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or Debtor 2		

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Fill in this infor	mation to identify your	case;			
Debtor 1	Angelis		Anderson		
	First Name	Middle Name	Last Name	-	
Debtor 2 (Spouse, it filing)	First Name	Middle Name	Last Name	_	
United States E	Sankruptcy Court for the:	Northern	District of Illinois		
Case number (ft known)	***************************************		(State)	- -	
Official	Form 106De	∋c			Check if this is an amended filing
Declarat	ion About an	Individual Deb	tor's Schedules		12/15
If two married	people are filing togeth	ier, both are equally respi	onsible for supplying correct i	nformation.	
Partik Sign	Below		ney to help you fill out bankru	50,000, or imprisonment for up to 20 y	outs, or both. To
√ No	.,		rey to nesp you im out pankin	prcy forms:	:
Lai	Name of person		Attach Bankruptcy Peti Signature (Official Form	ition Preparer's Notice, Declaration, and n 119).	; ! : : :
Under pen	salty of perfury. I declar	e that I have read the sur	nmary and schedules filed wit	th 4h for the observation and	
that they	are true and correct.	^ i	minuty and somedates med wit	in this deciaration and	
X /s/ Angel	is Anderson	V (mauser	Signature of	Dobtor 2	
Date 10/7,			Signature of	Senios 5	

MM/DD/YYYY

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Debtor 1 Angelis		Anderson	Case number (if known)
First Name	Middle Name	Last Name	
28. Within 2 years before you creditors, or other partie	a filed for bankruptcy, did yes.	/ou give a financial state	ment to anyone about your business? Include all financial institutions,
☑ No ☐ Yes. Fill in the details	below.		
		Date issued	
Name	** · · · · · · · · · · · · · · · · · ·	MM/DD/YYYY	_
Number Street			
City	State Zip Code	mann.	
Pari Pa Sign Below			
a bankruptcy case can res	ult in fines up to \$250,000,	atement, concealing pror	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with 0 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
Signature o	of Debtor y	•	Signature of Debtor 2
Date 10/7	/2016		Date
Did you attach additional p	ages to Your Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
No Yes			- , ,,
Did you pay or agree to pay	someone who is not an at	torney to help you fill out	bankruptcy forms?
No			
Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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ebtor Angelis		Anderson	Case number (if
First Name	Middle Name	Last Name	known)
inea List Your Unexpired	i Personal Property Leas	es	
or any unexpired personal pro formation below. Do not list ssume an unexpired personal	real estate leases. Unexpired	i leases are leases that :	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired p	ersonal property leases		Will the lease be assumed?
Lessor's name: Orchard Pl	ace of Englewood		No Ves
Description of leased property: Landlord			опоция Спория
Lessor's name:			No T Yes
Description of leased property:			
Lessor's name:			No Tyes
Description of leased property:			
Lessor's name:			No TYes
Description of leased property:			anderen
Lessor's name:			No Yes
Description of leased property:			, constant
Lessor's name:			No Yes
Description of leased property:			Vocaset
Lessor's name:			No Yes
Description of leased property:			Excussil .
ri∢s Sign Below			
Under penalty of perjury, I of property that is subject to		my intention about any p	property of my estate that secures a debt and any personal
/s/ Angelis Anderson/ Signature of Debtor 1	malio ander	Ø\\ × Sigr	nature of Debtor 1
Date 10/7/2016 MM/DD/YYYY	v	Date	MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Anderson, Angelis	Connidia	Ones No			
	Debtor(s)	Case No.				
		Chapter.	Chapter7			
	VERIFIC	ATION OF CREDITOR MAT	TRIX			
TI nowledge:	he above named Debtors hereby verify e.	that the attached list of creditors is to	rue and correct to the best of their			
ate:	10/7/2016	/s/ Anderson, Ar	11/VIII/AVV			
		Anderson, Ange Signature of Del				
		Signal of Signal	The state of the s			

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Debtor 1 Angelis First Name	k #Salafa ks	Anderson	Case number (if knx	2WA)	
THOLYONE	Middle Name	East Name	Column A Debtor 1	Column B Debtor 2 or	
under the Social Security Act	tion ou contend that the amount re Instead, list it here:	eceived was a benefit	\$0.00	non-filing spouse	
For your spouse		\$799.00 \$0.00			
9.Pension or retirement inco	ome. Do not include any amou irity Act.	nt received that was a	\$0.00		
payments received as a victin	benefits received under the So of a war crime, a crime again orism. If necessary, list other s	cial Security Act or			
Other Government Assistance	e		\$194.00		
Total amounts from separate	pages, if any.		+\$400.00	-t-	
11. Calculate your total curre	ent monthly income. Add line	s 2 through 10 for	\$594.00	•	\$594.00
column. Then add the tota	I for Column A to the total for	Column B.			
					Total current
Paraea Determine Whethe					monthly income
 Calculate your current mo Copy your total current in 	nthly income for the year. For monthly income from line 11.	ollow these steps:			
	ber of months in a year).		. Сору	/ line 11 here →	\$594.00
	I income for this part of the for	m,		12b	X 12
				125	\$7,128.00
13 Calculate the median famil	y income that applies to you	. Follow these steps:			
Fill in the state in which you li	ve	Illinois			
Fill in the number of people in	your household.	1			
Fill in the median family incom household.	ne for your state and size of	· · · · · · · · · · · · · · · · · · ·		13.	\$49,741.00
To find a list of applicable med instructions for this form, This 14. How do the lines compare?	dian income amounts, go onlir s list may also be available at th	ne using the link specified in a spe	n the separate		
	or equal to line 13. On the to	p of page 1, check box 1,	There is no presumption of a	abuse.	
14b. Line 12b is more that Go to Part 3 and fill	an line 13. On the top of page out Form 122A-2.	1, check box 2. The presu	mption of abuse is determin	ed by Form 122A-2.	
Pantes Sign Below	/				
By signing here, I declare un	der penalty of perjury that the i	nformation on this stateme	nt and in any attachments is	true and correct	
1			,		
/s/ Angelis Anderson	volo (mole	1911 x_			
Signature of Debtor 1		Sig	nature of Debtor 2		-
Date 10/7/2616 MM/DD/YYYY	V	Dat	e 10/7/2016 MM/DD/YYYY		:
	NOT fill out or file Form 122A	-2.			